## SENIOR WALKATHON ENTRY FORM - Sept. 25th 2021

Name	
Street Address	
City	_ Phone
Additional Contact Name	<del></del>
Additional Contact Phone	
Sponsor names and pledge amounts per la	ар:
1	Pledge per lap:
2	Pledge per lap:
3	Pledge per lap:
I in the Senior Walkathon and I am participal associated with participating in this activity physical or psychological injury, pain, suffer permanent disability (including paralysis), or I understand that these injuries or outcornegligence, conditions related to travel to a activity location. Nonetheless, I assume a me, of my participation in this activity.	am voluntarily participating at my own risk. I am aware of the risks which may include, but not be limited to: ering, illness, disfigurement, temporary or economic or emotional loss and death.
Signed:	
Date:	